## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application of	r Docket	Number
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CLAIMS AS FILED - PART				•			SMALL ENTITY			OTHER THAN		
			(Column	1)	(Colu	mn 2)	T	YPE		OR_	SMALL	ENTITY
TOTAL CLAIMS		04					RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			6 26 minus 20=		. 44			X\$ 9=		OR	X\$18=	192
INDEPENDENT CLAIMS & n				us 3 =	3 = 5			X40=		OR	X80=	400
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2	L	TOTAL		OR	TOTAL	1900	
	C	LAIMS AS A	MENDED	- PAR	ART II						OTHER	THAN
		(Column 1)			olumn 2) (Column 3)			SMALL E	NTITY	OR	OR SMALL ENT	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMEI	Independent	•	Minus	***		=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT					IT CLAIM			+135=		OR	+270=	
·							L A	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	•		-	="		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	•	Minus	**		=	] [	X\$ 9=		OR	X\$18=	
MEN	Independent	*	Minus	***		]=	] [	X40=	OF	OR	X80=	
Ľ	FIRST PRESE	NTATION OF M					┚╏	+135=		OR	+270=	
		BEST A	<b>WAILAE</b>	BLE !	COF	) <sub>\</sub>	L	TOTAL		OR	TOTAL ADDIT, FEE	
					umn 2)	(Column 3)		ADDIT. FEE			AUUII. PEE	:
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	17° 5°	HIC NU PRE\	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MO	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	Ì
	Independent	•	Minus	***		]=	4 [	X40=		OR	X80=	
ľ	FIRST PRES	ENTATION OF I	MULTIPLE DE	PENDE	NI CLAIN	1	<b> </b>	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							l	TOTAL		OR	TOTA	
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

pplication or Docket Number 014.39925 x 00.

CLAIMS AS FILED - PART I (Column 1)				(Colu	mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS		64		ય		F	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			64 minus 20=		* 44		>	(\$ 9=		OR	X\$18=	792
IND	EPENDENT CI	_AIMS	🖔 mi	nus 3 =	*	>	<b>(</b> 40=		OR	X80=	400.	
MULTIPLE DEPENDENT CLAIM PRESENT					· <u>·</u>		+	135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	T	OTAL		OR	TOTAL	1,902.
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3)	SI	MALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CLAIM	=	×	X40=		OR	X80=	
<b>L</b>	TINOTTALSE	INTATION OF W	OCHPLE DEF	LINDEN	CLANVI		+	135=		OR	+270=	
								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADD	111. FEE		2	AUUII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S S	Total	*	Minus	**		=	х	\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- OL ADA	=	X	40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MI	<del></del>				+1	135=	-	OR	+270=	
								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			25				
		mn 1 is less than th						35= TOTAL		OR	+270= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												